

**EXECUTIVE LOBBYING  
REGISTRATION/ RENEWAL FOR  
THE YEAR OF 2005**  
(Fill in year.)

**Instructions**

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics,  
2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or  
(800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a  
lobbyist or (2) first action requiring registration. Registrations expire as of  
December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Wilson Daniel M.  
Last First MI

2. BUSINESS PHONE 225-382-0045  
Area Code and Phone Number

3. FAX NUMBER 225-382-1227

4. BUSINESS ADDRESS One American Place, Suite 1018, Baton Rouge, LA 70825  
Street and No. City State Zip

MAILING ADDRESS P. O. Box 374, Baton Rouge, LA 70821  
Street and No. City State Zip

5. EMPLOYER BellSouth

6. EMPLOYER'S ADDRESS 365 Canal Street, Suite 3000, New Orleans, LA 70130-1102  
Street and No. City State Zip

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name BellSouth

Address 365 Canal Street, Suite 3000, New Orleans, LA 70130-1102

Business or purpose Telecommunications

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_



**FOR OFFICE USE ONLY**

Postmark Date: 02/24/05

Reg. 2005  
J# 3144

\$110.00 DWS

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ETHICS REGISTRATION  
CAMPAIGN FINANCE  
RECEIVED

**HAND DELIVERED**

**EXECUTIVE LOBBYING  
REGISTRATION FORM**



2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

**CERTIFICATION OF ACCURACY**

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Daniel M. Hilson  
Signature of Lobbyist

